

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 20 AM 11:17

DOCUMENT # P94000040750 (9)

1. Corporation Name

ORGANIC BODIES, INC.

Principal Place of Business

4343 NW 3RD ST
MIAMI FL 33126

Mailing Address

4343 NW 3RD ST
MIAMI FL 33126

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/27/1994	3a. Date of Last Report
4. FEI Number 65-0502439	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ X	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 190.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business 21 1866 SW 136 PLACE Suite, Apt. #, etc. 22	2a. Mailing Address 26 1866 SW 136 PLACE Suite, Apt. #, etc. 27
City & State 23 MIAMI - FLORIDA	City & State 28 MIAMI - FLORIDA
Zip 24 33175	Country 25 USA
Zip 29 33175	Country 30 U.S.A.

9. Name and Address of Current Registered Agent GONZALEZ, JESUS 4343 NW 3RD ST MIAMI FL 33126	10. Name and Address of New Registered Agent B1 Name ALINA - PURRINOS-PELAEZ B2 Street Address 425 SW 129 AVENUE B3 MIAMI - FLORIDA B4 City B5 Zip Code FL 33184
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Print name of registered agent and the address)

(Print Registered Agent Signature (required after reappointment))

02-14-95
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	NAME GONZALEZ, JESUS	1.1 TITLE	☒ Change ☐ Addition
STREET ADDRESS 4343 NW 3RD ST	CITY-ST-ZIP MIAMI-FL 33126	1.2 NAME	DELETE
TITLE D- V.P.	NAME GONZALEZ, LILIA	1.3 STREET ADDRESS	
STREET ADDRESS 4343 NW 3RD ST	CITY-ST-ZIP MIAMI FL 33126	1.4 CITY-ST-ZIP	
TITLE PRES + SEC + D	NAME PURRINOS-PELAEZ, ALINA	2.1 TITLE	
STREET ADDRESS 425 SW 129 AVENUE	CITY-ST-ZIP MIAMI-FLA 33184	2.2 NAME	V.P. GONZALEZ, LILIA 4343 NW 3 ST. MIAMI-FL 33126
TITLE	NAME	2.3 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	2.4 CITY-ST-ZIP	
TITLE	NAME	3.1 TITLE	
STREET ADDRESS	CITY-ST-ZIP	3.2 NAME	
TITLE	NAME	3.3 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	3.4 CITY-ST-ZIP	
TITLE	NAME	4.1 TITLE	
STREET ADDRESS	CITY-ST-ZIP	4.2 NAME	
TITLE	NAME	4.3 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE	
STREET ADDRESS	CITY-ST-ZIP	5.2 NAME	
TITLE	NAME	5.3 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	
STREET ADDRESS	CITY-ST-ZIP	6.2 NAME	
TITLE	NAME	6.3 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	6.4 CITY-ST-ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(2)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an addition with an address.

SIGNATURE:

(Print name and typed or printed name of signing officer or director)

2-14-95

551-7503